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(Depositor's name) Susan C. Harrison /Susan C. Harrison/ (Signature) 09/16/09 (Date)

\$1810.00

FIRST NAMED INVENTOR CONFIRMATION NO. ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE CPG 03-07 MB 5506 10/560,201 12/08/2005 Timothy Freeze

TITLE OF INVENTION: CHILD RESISTANT BLISTER PACKAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL PEE(S) DUB	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/15/2009
EXA	MINER	ART UNIT	CLASS-SUBCLASS]		
BUI, LI	JAN KIM	3728	206-531000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2] Change of correspondence address (or Change of Correspondence Address from PTO/SBI 122) attached. 3] "Fee Address" indication (or "Fee Address" Indication form FTO/SBI 47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single lime (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		Alison	R. Scheidler	
				. Tsugih:	iko Suzuki	
				n to		
3. ASSIGNEE NAME	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	pe)		

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

MeadWestvaco Corporation

Glen Allen, VA

Please check the appropriate assignee category or categories (with not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government

4b. Payment of Fcc(s): (Please first reapply any previously paid Issue fee shown above) 4a. The following fec(s) are submitted: A check is enclosed. S Issue Fee Payment by credit card. Form PTO-2038-Is attached: Via EFS Web Publication Fee (No small entity discount permitted)

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2500 (enclose an extra copy of this form). Advance Order - # of Copies overpayment, to Deposit Account Number 13-

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer elaiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.

Date 09/16/09 /Tsugihiko Suzuki/ Authorized Signature Tsugihiko Suzuki

36,321 Registration No. Typed or printed name

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